

PLEASE TYPE OR PRINT

Ms.

Mr. Artist

KATHLEEN

DRAGOMER

(Last Name Last)

Permanent
Address

3565 Avalon Rd SHAKER Hts

Street

City

44120

Tel. ()

283-6488

Zip

Area Code

Temporary
Address

SAME

Street

City

Tel. ()

Zip

Area Code

Permanent address is in what county?

CUYAHOGA

Born in Cuyahoga County Yes No

Collaborator

NO

(If Any)

If entries are not accepted or not sold:

Artist will pick up entries at Museum.

Museum should dispose of entries.

Museum should ship entries to artist C.O.D. at this address:

The attached card will be returned to you as notification of acceptance or rejection by the last week in April.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by the dates listed below.

It is also understood that accepted entries will remain on exhibition until June 10, 1973.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

Signature

Kathleen K Dragomer

CATEGORY 1. Paintings 2. Graphics 3. Photography L
ENTRY ONE 4. Sculpture 5. Electric 6. Crafts

Medium or Materials

MACRAMA - with Found Objects

Title

WOODED FORMS

Price or NFS	Insurance Value If NFS Only	Size
500.00		3' X 6'

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale	Total No. in Edition	Price Unframed	Price of Frames	Additional No. of Frames For Sale
			ACCEPTED	REJECTED
			V	
			FEE PAID	BY
			3/23	DS

CATEGORY 1. Paintings 2. Graphics 3. Photography
ENTRY TWO 4. Sculpture 5. Electric 6. Crafts

Medium or Materials

Title

Price or NFS	Insurance Value If NFS Only	Size

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale	Total No. in Edition	Price Unframed	Price of Frames	Additional No. of Frames For Sale
			ACCEPTED	REJECTED
			RECEIVED	BY
				DS

DO NOT DETACH

1973 MAY SHOW

The Cleveland Museum of Art
Cleveland, Ohio 44106

Please keep address within this box for window envelope.

Name	KATHLEEN DRAGOMER
Address	3565 Avalon Rd
City & State	SHAKER Hts, OHIO Zip 44120

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your notification of acceptance or rejection.

CATEGORY 1. Paintings 2. Graphics 3. Photography
ENTRY ONE 4. Sculpture 5. Electric 6. Crafts

Medium or Materials

MACRAMA - with Found Objects

Title

WOODED FORMS

DO NOT WRITE IN THIS SECTION

79 (+).

ACCEPTED

REJECTED

✓

1973 MAY SHOW

Notification of Acceptance or Rejection

KATHLEEN R DRAGOMER

Type or print name of artist

This is your only receipt to claim your object(s).

This notification will be mailed to you following judging.

DO NOT DETACH

CATEGORY 1. Paintings 2. Graphics 3. Photography
ENTRY TWO 4. Sculpture 5. Electric 6. Crafts

Medium or Materials

Title

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED